



Grafton Conservation Commission

GRAFTON MEMORIAL MUNICIPAL CENTER
30 PROVIDENCE ROAD
GRAFTON, MASSACHUSETTS 01519
Phone: (508) 839-5335 ext. 1138 • FAX: (508) 839-4602
www.grafton-ma.gov • concom@grafton-ma.gov

Grafton Wetlands Protection Bylaw Request for Determination of Applicability (RDA)

1. Location of proposed work:

Street Address

Grafton, MA

Zip Code

Assessor's Map Number

Assessor's Lot Number

The property is recorded at the Worcester County Registry of Deeds:

Book

Page

2. Property Owner:

Name

Address

Phone Number

E-mail Address

3. Applicant (if different from owner):

Name

Address

Phone Number

E-mail Address

4. Plans accompanying this application:

Title: _____ Date: _____

5. Description of the proposed project (attach additional sheets if necessary):



Grafton Conservation Commission

GRAFTON MEMORIAL MUNICIPAL CENTER
30 PROVIDENCE ROAD
GRAFTON, MASSACHUSETTS 01519

Phone: (508) 839-5335 ext. 1138 • FAX: (508) 839-4602
www.grafton-ma.gov • concom@grafton-ma.gov

6. I request that the Conservation Commission make a determination as to whether:

- ☐ The area described & shown on the attached plan(s) is subject to the Grafton Wetlands Protection Bylaw
- ☐ The work proposed & shown on the attached plan(s) is subject to the Grafton Wetlands Protection Bylaw
- ☐ The Commission concurs with the resource area boundaries as delineated on the attached plan(s)

7. I understand that notification of the public hearing to be held on this application with the Grafton Conservation Commission will be published in *The Grafton News*, or another newspaper circulated in Grafton, at my expense.

8. (If applicable) I am requesting a waiver from Section _____ of the Wetlands ☐ Bylaw and/or ☐ Regulations for the following reason(s) (attach additional sheets for additional requests):

9. I understand that occasionally, the hearing schedule of the Conservation Commission precludes holding a hearing precisely within 21 days. If the next regular meeting of the Conservation Commission is not scheduled within 21 days of the date of my filing of a complete application or if a hearing cannot be scheduled, I waive the 21-day requirement and agree to a later date for a hearing pursuant to the Grafton Wetlands Protection Bylaw, the Grafton Stormwater Management Bylaw, and MGL Ch. 131 §40.

10. I understand that it is my responsibility to obtain any and all other necessary permits, such as those required by: the Army Corps of Engineers, the Natural Heritage & Endangered Species Program (NHESP), National Pollutant Discharge Elimination System (NPDES), the Massachusetts Department of Environmental Protection (MassDEP), and other Grafton Bylaws.

Owner's signature _____ Date _____

Applicant's signature (if different from owner) _____ Date _____

(Written authorization from owner must be attached if not signed above by owner.)



Grafton Conservation Commission

GRAFTON MEMORIAL MUNICIPAL CENTER
30 PROVIDENCE ROAD
GRAFTON, MASSACHUSETTS 01519

Phone: (508) 839-5335 ext. 1138 • FAX: (508) 839-4602
www.grafton-ma.gov • concom@grafton-ma.gov

Wetlands Bylaw RDA Fee Worksheet

Category	Fee
<input type="checkbox"/> Area or work applicability determination	\$25
<input type="checkbox"/> Delineation determination for three (3) acres or less	\$50
<input type="checkbox"/> RDA with ANRAD for greater than three (3) acres up to ten (10) acres	\$50
<input type="checkbox"/> RDA with ANRAD for greater than ten (10) acres up to twenty-five (25) acres	\$75
<input type="checkbox"/> RDA with ANRAD for greater than twenty-five (25) acres up to 100 acres	\$100
<input type="checkbox"/> RDA with ANRAD for greater than 100 acres	\$100
+ Add \$0.25 per linear foot of delineation after the first 1,000 linear feet	\$_____
<input type="checkbox"/> Waiver request	\$50 x _____ Number of requests
	\$_____
Subtotal	\$_____

Multiplier (check if applicable)

<input type="checkbox"/> Application submitted after the commencement of work	x 2
<input type="checkbox"/> Activities within <i>both</i> Riverfront Area & another resource area	x 1.5
<input type="checkbox"/> Activities within <i>both</i> Riverfront Area & another resource area's buffer zone	x 1.5
TOTAL	\$_____



Grafton Conservation Commission

GRAFTON MEMORIAL MUNICIPAL CENTER
30 PROVIDENCE ROAD
GRAFTON, MASSACHUSETTS 01519

Phone: (508) 839-5335 ext. 1138 • FAX: (508) 839-4602
www.grafton-ma.gov • concom@grafton-ma.gov

Supplemental Items to Attach to This Application:

- ☐ DEP WPA Form 1: Request for Determination of Applicability (RDA) **OR** DEP WPA Form 4A: Abbreviated Notice of Resource Area Delineation (ANRAD)
- ☐ If applicable, cash or check payable to Town of Grafton for ANRAD fee
- ☐ Cash or check payable to Town of Grafton for Wetlands Bylaw fee
- ☐ Cash or check payable to Town of Grafton for legal ad (\$78.00)
- ☐ Certificate of Good Standing from Treasurer/Collector's Office
- ☐ If accompanying DEP Form 4A:
 - DEP Field Data Forms or other documentation for resource area delineations
 - Affidavit of abutter notification
 - Copy of notice to abutters
 - Certified list of all abutters within 300' of site from Assessor's Office
 - Certified mail receipts or certificate of mailing (*white* cards) for proof of abutter notification, sent 7+ days prior to hearing, to everyone on abutters list
- ☐ Plans
- ☐ Electronic submission of all documents (flash drive, CD, email)